Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OKLAHOMA	-	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	 Check if this an mended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Lorenzo First name J. Middle name Landrum Last name and Suffix (Sr., Jr., II, III)	Donericia First name Ivey Middle name Landrum Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		FKA Donericia Ivey Johnson
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2610	xxx-xx-0909

Debtor 1 Lorenzo J. Landrum
Debtor 2 Donericia Ivey Landrum Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs			
5.	Where you live	437 E. Tecumseh St.	If Debtor 2 lives at a different address:			
		Tulsa, OK 74106-4624 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Tulsa				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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	ebtor 2 Donericia Ivey Landrum			Case number (if known)				
Part 2: Tell the Court Abou		-						
7. The chapter of the Bankruptcy Code you a choosing to file under			of each, see <i>Notice Required by</i> f page 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing for Bankru e box.	ıptcy			
choosing to the under	■ Chapter 7							
	☐ Chapter 11							
	☐ Chapter 12							
	☐ Chapter 13							
8. How you will pay the fee	about ho order. If y a pre-prir	w you may pay. Typ your attorney is subi nted address.						
			by the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay ee in Installments (Official Form 103A).					
	but is not applies to	t required to, waive yo o your family size ar	your fee, and may do so only if yond you are unable to pay the fee ir	n only if you are filing for Chapter 7. By law, a judg ur income is less than 150% of the official poverty n installments). If you choose this option, you must cial Form 103B) and file it with your petition.	line tha			
9. Have you filed for	■ No.							
bankruptcy within the last 8 years?	☐ Yes.							
last o years:	⊔ res. Dist	trict	When	Case number				
	Dist		When	Case number Case number				
	Dist		When	Case number				
10. Are any bankruptcy	■ No							
cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	Yes.							
	Deb	otor		Relationship to you				
	Dist	rict	When	Case number, if known				
	Deb	otor		Relationship to you				
	Dist	rict	When	Case number, if known				
11. Do you rent your residence?	■ No. Go	o to line 12.						
	☐ Yes. Ha	ıs your landlord obta	ained an eviction judgment agains	t you and do you want to stay in your residence?				
		No. Go to line	12.					
		Yes. Fill out Inbankruptcy per		Judgment Against You (Form 101A) and file it with	this			

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	otor 1 Lorenzo J. Landru otor 2 Donericia Ivey La			Case number (if known)			
Par	Report About Any Bu	ısinesses	You Own as a Sole Proprie	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.				
		☐ Yes.	Name and location of bus	siness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	te & ZIP Code			
	it to this petition.			ox to describe your business:			
			☐ Health Care Busi	ness (as defined in 11 U.S.C. § 101(27A))			
			☐ Single Asset Rea	Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))			
			☐ Stockbroker (as o	Stockbroker (as defined in 11 U.S.C. § 101(53A))			
			☐ Commodity Broke	er (as defined in 11 U.S.C. § 101(6))			
			☐ None of the abov	е			
Chapter 11 of the deadline Bankruptcy Code and are operation		deadlines operation	s. If you indicate that you are	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure			
	For a definition of small	■ No.	I am not filing under Cha	oter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4: Report if You Own or	Have Any	Hazardous Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is the hazard?				
	identifiable hazard to public health or safety? Or do you own any						
	property that needs immediate attention?		If immediate attention is needed, why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?				
				Number, Street, City, State & Zip Code			

Debtor 1 Lorenzo J. Landrum Debtor 2 **Donericia Ivey Landrum** Case number (if known) Explain Your Efforts to Receive a Briefing About Credit Counseling Part 5: About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 15. Tell the court whether You must check one: You must check one: you have received a I received a briefing from an approved credit I received a briefing from an approved credit briefing about credit counseling agency within the 180 days before I counseling agency within the 180 days before I filed counseling. filed this bankruptcy petition, and I received a this bankruptcy petition, and I received a certificate of certificate of completion. completion. The law requires that you Attach a copy of the certificate and the payment Attach a copy of the certificate and the payment plan, if receive a briefing about plan, if any, that you developed with the agency. any, that you developed with the agency. credit counseling before you file for bankruptcy. I received a briefing from an approved credit I received a briefing from an approved credit You must truthfully check one of the following counseling agency within the 180 days before I counseling agency within the 180 days before I filed filed this bankruptcy petition, but I do not have this bankruptcy petition, but I do not have a certificate choices. If you cannot do so, you are not eligible to a certificate of completion. of completion. file. Within 14 days after you file this bankruptcy Within 14 days after you file this bankruptcy petition, you petition, you MUST file a copy of the certificate and MUST file a copy of the certificate and payment plan, if If you file anyway, the court payment plan, if any. can dismiss your case, you will lose whatever filing fee I certify that I asked for credit counseling ☐ I certify that I asked for credit counseling services you paid, and your from an approved agency, but was unable to obtain services from an approved agency, but was creditors can begin unable to obtain those services during the 7 those services during the 7 days after I made my collection activities again. request, and exigent circumstances merit a 30-day days after I made my request, and exigent circumstances merit a 30-day temporary waiver temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the attach a separate sheet explaining what efforts you made requirement, attach a separate sheet explaining to obtain the briefing, why you were unable to obtain it what efforts you made to obtain the briefing, why before you filed for bankruptcy, and what exigent you were unable to obtain it before you filed for circumstances required you to file this case. bankruptcy, and what exigent circumstances Your case may be dismissed if the court is dissatisfied required you to file this case. with your reasons for not receiving a briefing before you Your case may be dismissed if the court is filed for bankruptcy. dissatisfied with your reasons for not receiving a If the court is satisfied with your reasons, you must still briefing before you filed for bankruptcy. receive a briefing within 30 days after you file. You must If the court is satisfied with your reasons, you must file a certificate from the approved agency, along with a still receive a briefing within 30 days after you file. copy of the payment plan you developed, if any. If you do You must file a certificate from the approved not do so, your case may be dismissed. agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case Any extension of the 30-day deadline is granted only for may be dismissed. cause and is limited to a maximum of 15 days. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about I am not required to receive a briefing about credit credit counseling because of: counseling because of: Incapacity. Incapacity. I have a mental illness or a mental deficiency I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational that makes me incapable of realizing or making rational decisions about finances. decisions about finances. Disability. Disability. My physical disability causes me to be unable to My physical disability causes me to be unable to participate in a briefing in person, participate in a briefing in person, by phone, or by phone, or through the internet, even after I through the internet, even after I reasonably tried to reasonably tried to do so. do so.

Active duty.

combat zone.

of credit counseling with the court.

I am currently on active military duty in a military

If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for waiver

Active duty.

military combat zone.

I am currently on active military duty in a

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver credit counseling with the court.

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	tor 1 Lorenzo J. Land tor 2 Donericia Ivey L			Case n	number (if known)					
Part	6: Answer These Ques	stions for R	eporting Purposes							
16.	What kind of debts do you have?	16a.	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."							
you nave:			□ No. Go to line 16b.							
			Yes. Go to line 17.							
		16b.	Are your debts primarily busine money for a business or investme							
			☐ No. Go to line 16c.	• ,						
			☐ Yes. Go to line 17.							
		16c.	State the type of debts you owe th	aat are not consumer debts or bu	usiness debts					
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	o to line 18.						
after any exempt are paid that funds will be available property is excluded and		I am filing under Chapter 7. Do yo are paid that funds will be available.		t property is excluded and administrative expenses ditors?						
are paid that funds will be available for distribution to unsecured creditors?			■ No □ Yes							
18. How many Creditors do you estimate that you ☐ 1-49			□ 1,000-5,000 □ 5001-10,000	□ 25,001-50,000 □ 50,001-100,000						
	owe?	□ 50-99 □ 100-1 □ 200-9	99	10,001-25,000	☐ More than100,000					
19.	How much do you estimate your assets to	□ \$0 - \$ □ \$50.0	50,000 01 - \$100,000	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion					
	be worth?	\$ 100,	001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$10,000,000,001 - \$50 billion					
20.	How much do you estimate your liabilities	□ \$0 - \$	50,000 001 - \$100,000	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion					
	to be?	\$100 ,	001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$10,000,000,001 - \$50 billion					
Part	7: Sign Below									
For	you	I have ex	camined this petition, and I declare	under penalty of perjury that the	information provided is true and correct.					
					gible, under Chapter 7, 11,12, or 13 of title 11, and I choose to proceed under Chapter 7.					
			rney represents me and I did not pa tt, I have obtained and read the noti		is not an attorney to help me fill out this b).					
	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.									
		bankrupt and 3571	cy case can result in fines up to \$25	50,000, or imprisonment for up to	oney or property by fraud in connection with a to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,					
			nzo J. Landrum o J. Landrum		ia Ivey Landrum vey Landrum					
			e of Debtor 1	Signature of I						
		Executed	d on August 18, 2016 MM / DD / YYYY	Executed on	August 18, 2016 MM / DD / YYYY					
			IVIIVI. / DD / 1111		/ 55/ 1111					

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Debtor 1 Debtor 2 Donericia Ivey La		Cas	Case number (if known)				
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unite	ed States Code, and have e	e informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)				
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.	, certify that I have no knov	vledge after an inquiry that the information in the				
	/s/ Richard A. Chapman	Date	August 18, 2016				
	Signature of Attorney for Debtor		MM / DD / YYYY				
	Richard A. Chapman						
	Printed name						
	Richard A. Chapman, PC						
	Firm name						
	1612 S. Cincinnati Ave., Ste. 210						
	Tulsa, OK 74119						
	Number, Street, City, State & ZIP Code						
	Contact phone (918) 392-5170	Email address	rchapman@tulsacoxmail.com				
	17849						
	Bar number & State						

Certificate Number: 15317-OKN-CC-027913036



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>August 15, 2016</u>, at 4:15 o'clock <u>PM PDT</u>, <u>Donericia Landrum</u> received from <u>Access Counseling, Inc.</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>Northern District of Oklahoma</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: August 15, 2016

By: /s/Christel Raz

Name: Christel Raz

Title: Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Certificate Number: 15317-OKN-CC-027913203



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>August 15, 2016</u>, at 4:36 o'clock <u>PM PDT</u>, <u>Lorenzo J Landrum</u> received from <u>Access Counseling, Inc.</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>Northern District of Oklahoma</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: August 15, 2016 By: /s/Christel Raz

Name: Christel Raz

Title: Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Fill	in this information to identify your case:		
	otor 1 Lorenzo J. Landrum		
	First Name Middle Name Last Name		
	otor 2 Donericia Ivey Landrum First Name Middle Name Last Name		
Uni	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF OKLAHOMA		
	se number	_	ck if this is an
		amer	nded filing
	ficial Form 106Sum		
	mmary of Your Assets and Liabilities and Certain Statistical Information is complete and accurate as possible. If two married people are filing together, both are equally responsible for	or supplyi	12/15
nfo	r original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	t 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	93,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	21,040.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	114,040.00
Do	t 2: Summarize Your Liabilities		114,040.00
rai	2. Summanze rour Liabilities	V 1	
			l iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	81,455.70
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	88,212.88
	Your total liabilities	\$	169,668.58
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,827.18
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,555.25
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	our other so	chedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a persona	l, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this the court with your other schedules.	s <i>box</i> and s	submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

Jebtor 2	Donericia Ivey Landrum	Case number (if known)	
	om the Statement of Your Current Monthly Income: Copy your total of 2A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	current monthly income from Official Form	\$ 3,884.67

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 Lorenzo J. Landrum

	Total cla	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Cas	se 16-11500-R	Docume	ent 1	Filed in USBC ND/OK on	08/19/10	o Page 1	L2 01 66
Fill in this inforn	mation to identify your	case and thi	is filin	g:			
Debtor 1	Lorenzo J. Landı First Name	rum Middle	Name	Last Name			
Debtor 2 (Spouse, if filing)	Donericia Ivey La	andrum Middle	Name	Last Name			
	inkruptcy Court for the:			RICT OF OKLAHOMA			
	initiapitey Court for the.	TORTILITI	11 0101	THE TOTAL CITE WITH			
Case number _							Check if this is ar amended filing
_	rm 106A/B						
Schedul	e A/B: Prop	erty					12/15
Answer every ques Part 1: Describe		g, Land, or Oth	her Rea	I Estate You Own or Have an Interest In			
■ Yes. Where is	, , ,		Wha	t is the property? Check all that apply			
	cumseh St. if available, or other description	1		Single-family home Duplex or multi-unit building Condominium or cooperative	the amount	of any secured	ms or exemptions. Put claims on <i>Schedule D:</i> s <i>Secured by Property.</i>
Tulsa City	OK 741	106-4624 ZIP Code			Current va entire prop		Current value of the portion you own? \$93,000.00
C.ly	Ciaio		U U	Timeshare	Describe t	he nature of yo	ur ownership interest ncy by the entireties, or
Tulsa				Debtor 1 only	Fee sim	•	
County				Debtor 1 and Debtor 2 only			nunity property
				At least one of the debtors and another or information you wish to add about this iter oerty identification number:	,	cal	
			Leg	al Description: MEADOWBROOK AUNTY, STATE OF OKLAHOMA	ADDN S.95	i' LOT-10 BI	₋K-6, TULSA
				your entries from Part 1, including any er here		=>	\$93,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Debto Debto		orenzo J. Land Ionericia Ivey L			Case number (if known)	
Ca	rs, vans,	trucks, tractors,	sport utility ve	hicles, motorcycles		
	No					
•	res .					
3.1	Make:	Chevy		Who has an interest in the property? Check one		claims or exemptions. Put red claims on Schedule D:
	Model:	Silverado 150	00	Debtor 1 only		aims Secured by Property.
	Year:	2005		Debtor 2 only	Current value of the	Current value of the
	Approxin	nate mileage:	200,000	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other inf	formation:		☐ At least one of the debtors and another		
	Reg. C	ab 4.3L V6		☐ Check if this is community property (see instructions)	\$5,900.00	\$5,900.00
		Lovus			Do not deduct secured of	claims or exemptions. Put
3.2	Make:	Lexus		Who has an interest in the property? Check one	the amount of any secur	ed claims on Schedule D:
	Model:	LS430		☐ Debtor 1 only	Creditors Who Have Cla	aims Secured by Property.
	Year:	2004	135,000	Debtor 2 only	Current value of the	Current value of the
		nate mileage:	135,000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		formation: 4D 4.3L V8		☐ At least one of the debtors and another		
	Seuan	4D 4.3L VO		☐ Check if this is community property (see instructions)	\$10,400.00	\$10,400.00
				n for all of your entries from Part 2, including that number here		\$16,300.00
art 3	Doscri	be Your Personal a	nd Household Ite	nme		
				terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Ex		goods and furnis Major appliances,		, china, kitchenware		·
	Yes. De	scribe				
		Mi	sc. Househol	d Goods & Furnishings		\$2,500.0
					•	
		Mu	urray 42" decl	k riding lawnmower (Paid \$175.00 at paw	n shop)	\$175.0
Ex	No	Televisions and ra including cell phor		eo, stereo, and digital equipment; computers, prin nedia players, games	ters, scanners; music collect	ions; electronic devices
	Yes. De	scribe	a Place	(TV DVD alasses		\$4,000.0
		Mi	sc. Electronic	cs (TV, DVD player, computer, etc.)		\$1,000.0

	Debtor 1 Lorenzo J. Landrum Debtor 2 Donericia Ivey Landrum	Case number (if known)	
8.	8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, other collections, memorabilia, collectibles No	pictures, or other art objects; stamp, coin, or baseball card collections	s;
	Yes. Describe		
9.	 Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycomusical instruments 	cles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools;	;
	■ No □ Yes. Describe		
10	10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No		
	☐ Yes. Describe		
11	 11. Clothes	essories	
	Clothing, Coats, and Shoes	\$600.	.00
12	 12. Jewelry	rings, heirloom jewelry, watches, gems, gold, silver	
	Men's watch and wedding ring	\$400.	.00
13	13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No □ Yes. Describe		
14	 14. Any other personal and household items you did not already list, included No ☐ Yes. Give specific information 	ding any health aids you did not list	
15	15. Add the dollar value of all of your entries from Part 3, including any entries for Part 3. Write that number here		-
	Part 4: Describe Your Financial Assets		
D	Do you own or have any legal or equitable interest in any of the following?	? Current value of the portion you own? Do not deduct secured claims or exemptions.	
16	16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit b ■ No □ Yes	oox, and on hand when you file your petition	
17	 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of definistitutions. If you have multiple accounts with the same institution. □ No 		
	■ Yes Institution name) :	

Debtor 1 Debtor 2	Lorenzo J. Landrum Donericia Ivey Landrum			Case number (if known)	Case number (if known)		
		17.1.	Checking	Fire Fighters Credit Union	\$17.00		
		17.2.	Checking	Employees Federal Credit Union	\$25.00		
		17.3.	Checking	Arvest Bank	\$5.00		
		17.4.	Savings	Arvest	\$18.00		
40. D and			livitua da di ata alia				
			cly traded stocks ent accounts with b	prokerage firms, money market accounts			
■ No							
☐ Yes			Institution or issue	r name:			
joint	oublicly traded venture	I stock and	interests in incorp	porated and unincorporated businesses, including an interest	in an LLC, partnership, and		
■ No							
⊔ Yes	. Give specific		about themne of entity:				
Nego	otiable instrume	<i>nt</i> s include p	personal checks, ca	gotiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. ransfer to someone by signing or delivering them.			
☐ Yes	. Give specific		about them uer name:				
	ement or pens			403(b), thrift savings accounts, or other pension or profit-sharing	blane		
■ No	ipies. interests	III IIXA, LIXIX	SA, Reogn, 401(k),	405(b), tillit savings accounts, or other pension or profit-sharing p	Dialis		
	. List each acco		ely. of account:	Institution name:			
Your <i>Exan</i>		used deposit	s you have made s	so that you may continue service or use from a company t, public utilities (electric, gas, water), telecommunications compan	ies, or others		
■ No □ Yes				Institution name or individual:			
23. Annu ■ No	ities (A contrac	ct for a perior	dic payment of mor	ney to you, either for life or for a number of years)			
☐ Yes		Issuer nam	e and description.				
26 U.S	sts in an educ S.C. §§ 530(b)(qualified ABLE program, or under a qualified state tuition pro	gram.		
■ No □ Yes		Institution r	name and description	on. Separately file the records of any interests.11 U.S.C. § 521(c):			
			•	(other than anything listed in line 1), and rights or powers exe			
■ No □ Yes	. Give specific	information	about them				
				and other intellectual property eeds from royalties and licensing agreements			
■ No □ Yes	. Give specific	information	about them				

	ebtor 1 ebtor 2	Lorenzo J. Land Donericia Ivey I		Case number (if known)	
27.			other general intangibles , exclusive licenses, cooperative association	on holdings, liquor licenses, professional licens	es
		Give specific inform	ation about them		
M	oney or p	property owed to yo	ou?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	■ No	unds owed to you			
	☐ Yes. (Give specific informa	ition about them, including whether you air	eady filed the returns and the tax years	
29.	■ No			port, maintenance, divorce settlement, property	settlement
30.	Examp No		disability insurance payments, disability be loans you made to someone else	nefits, sick pay, vacation pay, workers' compe	nsation, Social Security
31.	Interest	ts in insurance poli	cies	(HSA); credit, homeowner's, or renter's insurar	nce
		Name the insurance	company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
			United of Omaha Life Insurance (I	No Spouse	\$0.00
			Mutual of Omaha (No cash surren value)	der Spouse	\$0.00
32.	If you a	erest in property th are the beneficiary of ne has died.	at is due you from someone who has d a living trust, expect proceeds from a life i	ied nsurance policy, or are currently entitled to rec	eive property because
	_	Give specific inform	ation		
33.			es, whether or not you have filed a laws oyment disputes, insurance claims, or righ		
	☐ Yes.	Describe each claim	l		
34.	■ No	-		ng counterclaims of the debtor and rights to	set off claims
25		Describe each claim			
ან.	■ No	ancial assets you on Give specific information	-		
	ப 165.	Oive specific initiffic	auon		
36			II of your entries from Part 4, including and the here	any entries for pages you have attached	\$65.00

Debtor Debtor			Case number (if known)	
Part 5:	Describe Any Business-Related Property You Own or Have an Inte	rest In. List any real esta	ite in Part 1.	
37. Do y	ou own or have any legal or equitable interest in any business-relat	ted property?		
■ No	. Go to Part 6.			
☐ Yes	s. Go to line 38.			
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property You lf you own or have an interest in farmland, list it in Part 1.	u Own or Have an Interes	st In.	
46. Do <u>y</u>	you own or have any legal or equitable interest in any farm-	or commercial fishin	g-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Exa ■ N	Describe All Property You Own or Have an Interest in That You you have other property of any kind you did not already list amples: Season tickets, country club membership oes. Give specific information			
54. A c	dd the dollar value of all of your entries from Part 7. Write th	nat number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. P a	art 1: Total real estate, line 2			\$93,000.00
56. Pa	art 2: Total vehicles, line 5	\$16,300.00		
57. Pa	art 3: Total personal and household items, line 15	\$4,675.00		
58. Pa	art 4: Total financial assets, line 36	\$65.00		
59. Pa	art 5: Total business-related property, line 45	\$0.00		
60. P a	art 6: Total farm- and fishing-related property, line 52	\$0.00		
61. P a	ert 7: Total other property not listed, line 54	\$0.00		
62. T o	otal personal property. Add lines 56 through 61	\$21,040.00	Copy personal property total	\$21,040.00
63. T o	otal of all property on Schedule A/B. Add line 55 + line 62		_	\$114,040.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Lorenzo J. Landr	um		
	First Name	Middle Name	Last Name	
Debtor 2	Donericia Ivey La	ındrum		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OKLAHOMA	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
437 E. Tecumseh St. Tulsa, OK 74106-4624 Tulsa County	\$93,000.00		\$93,000.00	Okla. Stat. tit. 31, §§ 1(A)(1),(2); Okla. Stat. tit. 31, §	
Legal Description: MEADOWBROOK ADDN S.95' LOT-10 BLK-6, TULSA COUNTY, STATE OF OKLAHOMA Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	2	
2005 Chevy Silverado 1500 200,000 miles	\$5,900.00		\$2,000.00	Okla. Stat. tit. 31, § 1(A)(13)	
Reg. Cab 4.3L V6			100% of fair market value, up to		
Line from Schedule A/B: 3.1			any applicable statutory limit		
2004 Lexus LS430 135,000 miles Sedan 4D 4.3L V8	\$10,400.00		\$6,400.00	Okla. Stat. tit. 31, § 1(A)(13)	
Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit		
Misc. Household Goods & Furnishings	\$2,500.00		\$2,500.00	Okla. Stat. tit. 31, § 1(A)(3)	
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
Murray 42" deck riding lawnmower (Paid \$175.00 at pawn shop)	\$175.00		\$175.00	Okla. Stat. tit. 31, § 1(A)(3)	
Line from Schedule A/B: 6.2			100% of fair market value, up to any applicable statutory limit		

Official Form 106C

Debtor Debtor				Case number (if known)			
	Brief description of the property and line on Schedule A/B that lists this property Current value of the portion you own			Amount of the exemption you claim Specific laws that allow exempti			
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.			
	sc. Electronics (TV, DVD player, emputer, etc.)	\$1,000.00		\$1,000.00	Okla. Stat. tit. 31, § 1(A)(3)		
	e from <i>Schedule A/B</i> : 7.1			100% of fair market value, up to any applicable statutory limit			
	othing, Coats, and Shoes	\$600.00		\$600.00	Okla. Stat. tit. 31, § 1(A)(7)		
	o nom concede 702.			100% of fair market value, up to any applicable statutory limit			
	en's watch and wedding ring	\$400.00		\$400.00	Okla. Stat. tit. 31, § 1(A)(8)		
LIII	io nom ouredure 7/2. 12.1			100% of fair market value, up to any applicable statutory limit			
	ecking: Fire Fighters Credit Union of from Schedule A/B: 17.1	\$17.00		75%	Okla. Stat. tit. 12, § 1171.1; Okla. Stat. tit. 31, § 1(A)(18)		
LIII	le Hotti Scriedale A/B. 1111			100% of fair market value, up to any applicable statutory limit	Ontal Otal III 01, § 1(A)(10)		
Ch Ur	ecking: Employees Federal Credit	\$25.00		\$75.00	Okla. Stat. tit. 12, § 1171.1; Okla. Stat. tit. 31, § 1(A)(18)		
	ne from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit			
	necking: Arvest Bank	\$5.00		75%	Okla. Stat. tit. 12, § 1171.1; Okla. Stat. tit. 31, § 1(A)(18)		
LIII	le Hotti Schedule A/B. 11.3			100% of fair market value, up to any applicable statutory limit	Oria. Otat. III. 31, § 1(A)(10)		
	vings: Arvest ne from Schedule A/B: 17.4	\$18.00		75%	Okla. Stat. tit. 12, § 1171.1; Okla. Stat. tit. 31, § 1(A)(18)		
LIII	le Hotti Scriedale A/B. 1114			100% of fair market value, up to any applicable statutory limit	Ontal Otal III 01, § 1(A)(10)		
	e you claiming a homestead exemption of ubject to adjustment on 4/01/19 and every 3			led on or after the date of adjustme	nt.)		
	Yes. Did you acquire the property covere ☐ No	ed by the exemption wi	thin 1	,215 days before you filed this case	?		
	☐ Yes						

Fill in this information to i	dentify you	r case:			
Debtor 1 Loren:	zo J. Land	rum			
First Nam		Middle Name Last Name			
Debtor 2 Doner	icia Ivey L	andrum			
(Spouse if, filing) First Nam		Middle Name Last Name			
United States Bankruptcy C	ourt for the:	NORTHERN DISTRICT OF OKLAHOMA			
Case number					
(if known)				☐ Check	if this is an
				amend	led filing
				_	
Official Form 106D					
Schedule D: Cre	editors	Who Have Claims Secure	d by Property		12/15
is needed, copy the Additional number (if known).	Page, fill it o	two married people are filing together, both are e ut, number the entries, and attach it to this form.			
1. Do any creditors have claim	•				
	ind submit th	is form to the court with your other schedules.	You have nothing else to	report on this form.	
Yes. Fill in all of the i	nformation b	pelow.			
Part 1: List All Secured	Claims				
		nore than one secured claim, list the creditor separate	Column A	Column B	Column C
for each claim. If more than one	e creditor has	a particular claim, list the other creditors in Part 2. As all order according to the creditor's name.	Amount of claim Do not deduct the	Value of collateral that supports this claim	Unsecured portion If any
2.1 Bank of America		Describe the property that secures the claim:	\$4,000.00	\$10,400.00	\$0.00
Creditor's Name		2004 Lexus LS430 135,000 miles			
		Sedan 4D 4.3L V8			
475 CrossPoint Pk	wy	As of the date you file, the claim is: Check all that			
PO Box 9000	_	apply.			
Getzville, NY 1406	8	☐ Contingent			
Number, Street, City, State &	Zip Code	☐ Unliquidated			
Who awas the dahta of		Disputed			
Who owes the debt? Check	one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only		An agreement you made (such as mortgage or so	ecured		
Debtor 2 only		car loan)			
Debtor 1 and Debtor 2 only		☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors a		☐ Judgment lien from a lawsuit			
☐ Check if this claim relates community debt	to a	Other (including a right to offset)			
community debt					
Date debt was incurred	2013	Last 4 digits of account number			
2.2 Chase Home Finar	nce	Describe the property that secures the claim:	\$73,555.70	\$93,000.00	\$0.00
Creditor's Name		437 E. Tecumseh St. Tulsa, OK			
		74106-4624 Tulsa County			
		Legal Description:			
		MEADOWBROOK ADDN S.95'			
		LOT-10 BLK-6, TULSA COUNTY,			
PO Box 24696		STATE OF OKLAHOMA			
Columbus, OH		As of the date you file, the claim is: Check all that apply.			
43224-4696		Contingent			
Number, Street, City, State &	Zip Code	☐ Unliquidated			
		☐ Disputed			
Who owes the debt? Check	one.	Nature of lien. Check all that apply.			
Debtor 1 only		An agreement you made (such as mortgage or se	ecured		
Debtor 2 only		car loan)			
Debtor 1 and Debtor 2 only		☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors a	and another	☐ Judgment lien from a lawsuit			

Official Form 106D

Debtor 1 Lorenzo J. Landrum			Case number (if know)		
First Name Middle I	Name Last Name		_		
Debtor 2 Donericia Ivey Landrur	n				
First Name Middle I	Name Last Name				
☐ Check if this claim relates to a community debt	Other (including a right to offset)	Mortgage			
Date debt was incurred 2004	Last 4 digits of account num	ber <u>5088</u>			
2.3 OneMain Financial	Describe the property that secures	the claim:	\$3,900.00	\$5,900.00	\$0.00
Creditor's Name	2005 Chevy Silverado 1500	200,000			
	miles				
	Reg. Cab 4.3L V6				
3602-10 E. 51st St.	As of the date you file, the claim is: apply.	Check all that			
Tulsa, OK 74135	Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only	An agreement you made (such as	mortgage or s	ecured		
☐ Debtor 2 only	car loan)				
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)	Non-Purc	hase Money Security		
Date debt was incurred 04/2013	Last 4 digits of account num	nber			
Add the dollar value of your entries in	Column A on this page. Write that nun	nber here:	\$81,455.70	J	
If this is the last page of your form, add Write that number here:			\$81,455.70		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	Case 10-11500-R	Document 1	Filed III USBC N	ID/OK 011 08/19/10	5 Paye 22 01 66
Fill in this	information to identify your	case:			
Debtor 1	Lorenzo I Londr	1100			
Deplor	Lorenzo J. Landru First Name	Middle Name	Last Name		
Debtor 2	Donericia Ivey La		Zaot Hamo		
(Spouse if, filing		Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	NORTHERN DIS	TRICT OF OKLAHOMA		
Case num	har				
(if known)					☐ Check if this is an
					amended filing
	Form 106E/F				
Schedu	ule E/F: Creditors W	ho Have Un	secured Claims		12/15
Schedule D: left. Attach t name and ca	the Continuation Page to this pag ase number (if known).	ured by Property. If I ge. If you have no inf	more space is needed, copy	the Part you need, fill it out, r	ecured claims that are listed in number the entries in the boxes on the op of any additional pages, write your
	List All of Your PRIORITY Un				
1. Do any	creditors have priority unsecure	d claims against you	1?		
No.	Go to Part 2.				
☐ Yes.	-				
Part 2:	List All of Your NONPRIORIT	Y Unsecured Clai	ms		
_ `	You have nothing to report in this p	-		edules.	
unsecui		y for each claim. For e	ach claim listed, identify what t	type of claim it is. Do not list cla	or has more than one nonpriority aims already included in Part 1. If more aims fill out the Continuation Page of
					Total claim
4.1 A r	merican Express	Last	4 digits of account number	1007	\$2,391.16
	onpriority Creditor's Name				
	O Box 650448	Whe	n was the debt incurred?	2015	
	allas, TX 75265-0448 Imber Street City State Zlp Code		f the data you file the alaim	in Chack all that apply	
	no incurred the debt? Check one.	AS U	f the date you file, the claim	s. Check all that apply	
	Debtor 1 only	П.			
	Debtor 2 only		ontingent Inliquidated		
	Debtor 1 and Debtor 2 only		isputed		
	At least one of the debtors and and	_	of NONPRIORITY unsecure	d claim:	
			tudent loans		
⊔ de	Check if this claim is for a comi	nunity		ration agreement or divorce th	at you did not
	the claim subject to offset?		rt as priority claims	nation agreement of divorce th	at you did not
	No		ebts to pension or profit-sharin	g plans, and other similar debt	S
	Yes	■ c	other. Specify Credit Card	I	

Lorenzo J. Landrum Donericia Ivey Landrum		Case number (if know)				
Bank of America	Last 4 digits of account number	1080	\$7,181.38			
Nonpriority Creditor's Name PO Box 982235 El Paso, TX 79998-2235	When was the debt incurred?	2014-2016				
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
Who incurred the debt? Check one.						
☐ Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not				
■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
☐ Yes	Other. Specify Credit Card	I (AAA)				
Capital One	Last 4 digits of account number	4092	\$919.84			
Nonpriority Creditor's Name Bankruptcy Claims Servicer PO Box 30285	When was the debt incurred?	2014-2016				
Salt Lake City, UT 84130-0285						
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply				
■ Debtor 1 only	☐ Contingent					
☐ Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
Yes	Other. Specify Credit Card	<u> </u>				
Capital One	Last 4 digits of account number	6298	\$10,181.36			
Nonpriority Creditor's Name Bankruptcy Claims Servicer PO Box 30285	When was the debt incurred?	2012-2016				
Salt Lake City, UT 84130-0285 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
Who incurred the debt? Check one.						
Debtor 1 only	☐ Contingent					
Debtor 2 only	Unliquidated					
Debtor 1 and Debtor 2 only	Disputed					
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	a ciaim:				
Check if this claim is for a community debt		and the second s				
ls the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	• •					
■ No	Debts to pension or profit-sharing	g plans, and other similar debts				

	1 Lorenzo J. Landrum 2 Donericia Ivey Landrum		Case number (if know)				
4.5	Capital One Retail Services	Last 4 digits of account number	3076	\$6,814.72			
	Nonpriority Creditor's Name PO Box 30257	When was the debt incurred?	2014-2016				
	Salt Lake City, UT 84130-0257 Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply				
	Who incurred the debt? Check one.						
	☐ Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Credit Card	<u> </u>				
.6	Cash Finance of Tulsa	Last 4 digits of account number	6524	\$1,070.00			
	Nonpriority Creditor's Name 801-A S. Detroit Ave. Tulsa, OK 74120	When was the debt incurred?	06/2016	·			
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply				
	Who incurred the debt? Check one.	•	,				
	Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Note Loan					
7	Citi Customer Service	Last 4 digits of account number	8667	\$7,216.78			
	Nonpriority Creditor's Name PO Box 6500	When was the debt incurred?	2013-2016	. ,			
	Sioux Falls, SD 57117-6500 Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	■ Other Specify Credit Card	- •				

	Lorenzo J. Landrum Donericia Ivey Landrum		Case number (if know)				
	Citi Customer Service	Last 4 digits of account number	0239	\$486.82			
	Nonpriority Creditor's Name PO Box 6500 Sioux Falls, SD 57117-6500	When was the debt incurred?	2013-2016				
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset? In No In Debts to pension or profit-sharing plans, and other similar debts In No In Debts to pension or profit-sharing plans, and other similar debts In Other. Specify In Debts to pension or profit-sharing plans, and other similar debts In Other. Specify In Debts to pension or profit-sharing plans, and other similar debts In Other. Specify In Debts to pension or profit-sharing plans, and other similar debts In Other. Specify In Debts to pension or profit-sharing plans, and other similar debts In Other. Specify In Debts to pension or profit-sharing plans, and other similar debts In Other. Specify In Debts 4 digits of account number In Debts 4 digits 6 digits 4 digits 6 digits		ration agreement or divorce that you did not				
	_	<u>-</u> ' '	g plans, and other similar debts				
	Yes	■ Other. Specify Credit Card	<u> </u>				
		Last 4 digits of account number	1475	\$863.28			
		When was the debt incurred?	2014-2016	\$863.28			
	PO Box 182125						
		As of the date you file the claim	e. Check all that apply				
		As of the date you me, the claim	S. Officer all that apply				
	☐ Debtor 1 only	☐ Contingent					
	■ Debtor 2 only						
	•	_ `	· · ·				
	-	·	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Credit Card	I (Catherine's)				
4.1	Credit One Bank	Last 4 digits of account number	7888	\$426.89			
	Nonpriority Creditor's Name	_					
	Bank Card Center PO Box 98873	When was the debt incurred?	2016				
	Las Vegas, NV 89193-8873						
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Credit Card	<u> </u>				

	or 1 Lorenzo J. Landrum Donericia Ivey Landrum	Case number (if know)				
4.1 1	Credit One Bank	Last 4 digits of account number	1479	\$1,684.36		
	Nonpriority Creditor's Name Bank Card Center PO Box 98873 Las Vegas, NV 89193-8873	When was the debt incurred?	2014-2016			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	No No	Debts to pension or profit-sharin				
	Yes	Other. Specify Credit Card	<u> </u>			
4.1	Discover	Last 4 digits of account number	4956	\$4,848.38		
	Nonpriority Creditor's Name PO Box 3025 New Albany, OH 43054-3025	When was the debt incurred?	2013-2016			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	<u> </u>				
	-	☐ Disputed Type of NONPRIORITY unsecured	d claim:			
	At least one of the debtors and another	☐ Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharin				
	■ No □ Yes	Other. Specify Credit Card				
		— Outer. Opening				
4.1 3	Discover Nonpriority Creditor's Name	Last 4 digits of account number	7594	\$15,653.47		
	PO Box 3025 New Albany, OH 43054-3025	When was the debt incurred?	2013-2016			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.	_				
	Debtor 1 only	☐ Contingent				
	■ Debtor 2 only					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharin	g plans, and other similar debts			
		·				
	☐ Yes	Other. Specify Credit Card	<u> </u>			

	Lorenzo J. Landrum Donericia Ivey Landrum	Case number (if know)			
4.1	Firefighters' Credit Union	Last 4 digits of account number	\$2,000.00		
4	Nonpriority Creditor's Name 9200 East 41st St.	When was the debt incurred? 2015			
	Tulsa, OK 74145				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	П			
		☐ Contingent			
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans			
	☐ Check if this claim is for a community debt				
	Is the claim subject to offset?	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 			
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Personal Loan			
4.1	Hillcrest HealthCare System	Last 4 digits of account number 1137	\$2,846.00		
5	Nonpriority Creditor's Name				
	PO Box 9800 Coral Springs, FL 33075-9800	When was the debt incurred? 04/2016			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Medical			
4.1			AT 000 05		
6	Hillcrest HealthCare System Nonpriority Creditor's Name	Last 4 digits of account number	\$7,836.65		
	PO Box 9800 Coral Springs, FL 33075-9800	When was the debt incurred? 08/2015			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	\$7,836.65		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Medical			

	1 Lorenzo J. Landrum 2 Donericia Ivey Landrum		Case number (if know)		
'	Hillcrest HealthCare System	Last 4 digits of account number		\$92.45	
	Nonpriority Creditor's Name PO Box 9800 Coral Springs, FL 33075-9800	When was the debt incurred?	08/2015	at you did not	
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Medical			
4.1	Hillcrest HealthCare System	Last 4 digits of account number	1221	\$1,200.00	
	Nonpriority Creditor's Name PO Box 9800 Coral Springs, FL 33075-9800	When was the debt incurred?	07/2014		
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim			
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecure			
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not		
	No	Debts to pension or profit-sharir			
	Yes	Other. Specify Medical			
4.1 9	Merrick Bank	Last 4 digits of account number	2426	\$2,804.48	
	PO Box 9201 Old Bethpage, NY 11804-9002	When was the debt incurred?	2014-2016		
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	Yes	Other. Specify Credit Card	<u> </u>		

	or 1 Lorenzo J. Landrum or 2 Donericia Ivey Landrum	Case number (if know)				
4.2	Pioneer Services		4206	\$692.04		
0	Nonpriority Creditor's Name	Last 4 digits of account number		\$57.80 \$1,206.15		
	PO Box 801634 Kansas City, MO 64180-1634	When was the debt incurred?	2016			
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply			
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Credit				
4.2	Regional Medical Laboratory	Last 4 digits of account number	2306	\$57.80		
1	Nonpriority Creditor's Name			40.100		
	9330 East 41st St., Suite 105 Tulsa, OK 74145	When was the debt incurred?	2015-2016			
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply			
	Who incurred the debt? Check one.					
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Medical				
4.2	Sears Credit Cards	Last 4 digits of account number	2719	\$1,206.15		
	Nonpriority Creditor's Name	_				
	PO Box 6282	When was the debt incurred?	2014-2016			
	Sioux Falls, SD 57117-6282 Number Street City State Zlp Code	As of the date you file, the claim	s: Chack all that apply			
	Who incurred the debt? Check one.	As of the date you me, the claim	5. Спеск ан тат арру			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only					
		☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured				
	☐ At least one of the debtors and another	Student loans	a Glanni.			
	☐ Check if this claim is for a community debt	_	ration agreement or diverse that you did and			
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	☐ Yes	Other. Specify Credit Card				
	_ 103	- Other. Specify	•			

	or 1 Lorenzo J. Landrum Or 2 Donericia Ivey Landrum		Case number (if know)	
4.2 3	Sears Credit Cards	Last 4 digits of account number	5112	\$4,653.02
	Nonpriority Creditor's Name PO Box 6282 Sioux Falls, SD 57117-6282	When was the debt incurred?	2014-2016	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.2	St. John Health System	Last 4 digits of account number	7301	\$175.83
	Nonpriority Creditor's Name 1923 South Utica Avenue Attn: Business Office	When was the debt incurred?		
	Tulsa, OK 74104-6502 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical		
4.2 5	Synchrony Bank Nonpriority Creditor's Name	Last 4 digits of account number	9573	\$3,379.92
	Attn: Bankruptcy Dept. PO Box 965060	When was the debt incurred?	2013-2016	
	Orlando, FL 32896-5060 Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	•		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debte	
	■ No	· ·	• •	
	Yes	Other. Specify Credit Card	(JCPenney)	

Debtor 1 Lorenzo J. Landrum Debtor 2 Donericia Ivey Landrum		Case number (if know)				
4.2 6	Synchrony Bank	Last 4 digits of account number	7911	\$949.01		
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 965060 Orlando, FL 32896-5060	When was the debt incurred?	2013-2016			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing	- :			
	Yes	Other. Specify Credit Card	(JCPenney)			
4.2 7	Synchrony Bank Nonpriority Creditor's Name	Last 4 digits of account number	5296	\$501.70		
	Attn: Bankruptcy Dept. PO Box 965060	When was the debt incurred?	2013-2016			
	Orlando, FL 32896-5060 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only					
		☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	l eleter.			
	At least one of the debtors and another	Student loans	a ciaim:			
	☐ Check if this claim is for a community debt					
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Credit Card	(Belk)			
4.2	Tulsa Emergency Medical Center,		1757	\$88.39		
8	Inc. Nonpriority Creditor's Name 2550 N. Thunderbird Cr., Ste. 123	Last 4 digits of account number When was the debt incurred?	2015	Ψ00.39		
	Mesa, AZ 85215-1217					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	☐ Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	debt Is the claim subject to offset?					
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts			
	☐ Yes	■ Other. Specify Medical				
	— 163	Utner. Specify				

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

Debtor 1 Lorenzo J. Landrum				
Debtor 2 Donericia Ivey Landrum		Case number (if know)		
have more than one creditor for any of the del notified for any debts in Parts 1 or 2, do not fil		e additional creditors here. If you do not have additional persons to be		
Name and Address	On which entry in Part 1 or Part 2 or	lid you list the original creditor?		
Financial Corporation of America	Line 4.18 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims		
PO Box 203500 Austin, TX 78720-3500		Part 2: Creditors with Nonpriority Unsecured Claims		
,	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 or	lid you list the original creditor?		
TAB Services	Line 4.21 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims		
1754 Utica Square		■ Part 2: Creditors with Nonpriority Unsecured Claims		
PO Box 52039				
Tulsa, OK 74152-0039				
	Last 4 digits of account number	2525		

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				•	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	88,212.88
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	88,212.88

Fill in this information to identify your case:						
Debtor 1	Lorenzo J. Landr	um				
	First Name	Middle Name	Last Name			
Debtor 2	Donericia Ivey La	ndrum				
(Spouse if, filing)	First Name	Middle Name	Last Name	_		
	nkruptcy Court for the:	NORTHERN DISTRICT	OF OKLAHOMA			
Case number					☐ Check if this is an amended filing	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have th r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				<u> </u>
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4	<u> </u>		<u> </u>		
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>

Fill in this in	formation to identify your	case:			
Debtor 1	Lorenzo J. Landr	um			
	First Name				
Debtor 2 (Spouse if, filing)	Donericia Ivey La First Name	Indrum Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT	OF OKLAHOMA		
Case number	r				
(if known)					Check if this is an
					amended filing
Official I	Form 106H				
	le H: Your Cod	ehtors			12/15
Jonicaa	ic II. Ioui oou	CDIOIS			12/13
1. Do yo	nd case number (if known) u have any codebtors? (If			as a codebtor.	
■ No □ Yes					
■ No. Go □ Yes. □ 3. In Colum in line 2	again as a codebtor only i 6D), Schedule E/F (Official	use, or legal equivalent live ors. Do not include your f that person is a guaran	e with you at the time? spouse as a codebtontor or cosigner. Make	r if your spouse is filir sure you have listed t	ng with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
Со	olumn 1: Your codebtor ne, Number, Street, City, State and Zi	IP Code		Column 2: The cr Check all schedul	editor to whom you owe the debt
	•			555.1 dii 55115ddi	«Peb.).
3.1 Nar	mo			Schedule D, lir	
Ivai	ille			☐ Schedule E/F,	
				☐ Schedule G, lir	ne
Nui City	mber Street	State	ZIP Code		
					
3.2 Nar	me			Schedule D, lir	
				☐ Schedule E/F,☐ Schedule G, lin	
Nui City	mber Street	State	ZIP Code		
,					

Schedule H: Your Codebtors

Fill in this informat	tion to identify your case:	
Debtor 1	Lorenzo J. Landrum	_
Debtor 2 (Spouse, if filing)	Donericia Ivey Landrum	_
United States Ban	nkruptcy Court for the: NORTHERN DISTRICT OF OKLAHOMA	_
Case number		Check if this is: An amended filing A supplement showing postpetition chapte
Official Fo	rm 106l	13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. ■ Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation **HTS** Teacher's Asst. Include part-time, seasonal, or Independent Opportunities, self-employed work. **Tulsa Public Schools Employer's name** Occupation may include student or homemaker, if it applies. **Employer's address** 6202 S. Lewis Ave., Ste. P PO Box 470208 Tulsa, OK 74136 Tulsa, OK 74147-0208 How long employed there? 12 Yrs. 4 Yrs.

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 2 or For Debtor 1 non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 594.19 1,328.41 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 +\$ 0.00 3. Calculate gross Income. Add line 2 + line 3. 594.19 1,328.41

Deb Deb	tor 1 tor 2	Lorenzo J. Landrum Donericia Ivey Landrum	=	Ca	se number (<i>if ki</i>	nown)				
	Copy line 4 here		4.	F	or Debtor 1	4.19		Debtor 2 -filing spo		
5.	l ist	all payroll deductions:								
J.	5a. 5b. 5c. 5d. 5e. 5f.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations	5a. 5b. 5c. 5d. 5e. 5f.	\$ \$ \$ \$		2.37 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$	1:	21.83 0.00 0.00 0.00 0.00 0.00	
	5g. 5h.	Union dues Other deductions. Specify:	5g. 5h	\$ + \$		0.00	*		0.00	-
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.	\$		2.37	\$	12	21.83	
7.	Calo	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$		1.82	\$		06.58	•
8.	8a. 8b. 8c. 8d. 8e. 8f.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify:	8c. 8d. 8e. 8f. 8g. 8h		1,14	0.00 0.00 0.00		1,93	0.00 0.00 0.00 0.00 0.00 0.00 38.78 0.00	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	1,140	0.00	\$_	1,9	938.78	3
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	·	1,681.82	+ \$	3,1		\$	4,827.18
11.	Inclu othe	the all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	deper				•	Schedule J 11		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain lies						12.	\$	4,827.18
13.	Do y	you expect an increase or decrease within the year after you file this form?	?						ombir nonthl	ned y income
		No. Yes. Explain:								
		L								

EIII	in this informa	ation to identify yo	our case.					
						O		
Deb	otor 1	Lorenzo J. L	.andrum				t if this is: An amended filing	
	otor 2 ouse, if filing)	Donericia Iv	ey Landr	um			supplement show	ving postpetition chapter the following date:
Unit	ted States Bank	ruptcy Court for the	: NORTH	HERN DISTRICT OF OKLA	.НОМА	<u> </u>	MM / DD / YYYY	
	se number nown)							
O	fficial Fo	rm 106J						
S	chedule	J: Your	Exper	ises				12/15
info	ormation. If m	and accurate as nore space is ne n). Answer eve	eded, atta	If two married people and the change of the	e filing together, bo form. On the top of	oth are equal any addition	lly responsible fon nal pages, write y	r supplying correct our name and case
Par		ribe Your House	hold					
1.	Is this a joir							
	_		in a separ	ate household?				
	. 00. ⊃ 0							
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of Debto	or 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						☐ Yes ☐ No
								☐ Yes
								□ No
								☐ Yes
								□ No □ Yes
3.	Do your exp	penses include		No				□ res
		of people other t d your depende	han $_{\square}$	Yes				
Est	imate your ex	a date after the	our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance it sluded it on Schedule I: Y			Your expe	enses
,51		,						
4.		or home owners nd any rent for th		ses for your residence. In or lot.	nclude first mortgage	4. \$		979.56
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a. \$		0.00
	•	erty, homeowner's				4b. \$		0.00
		e maintenance, re eowner's associa		ipkeep expenses		4c. \$ 4d. \$		150.00
5.				our residence, such as ho	me equity loans	5. \$		0.00 0.00

tor 1 Lorenzo J. Landrum tor 2 Donericia Ivey Landr	um	Case num	ber (if known)	
Utilities:				
6a. Electricity, heat, natural g	as	6a.	\$	250.00
6b. Water, sewer, garbage co	ollection	6b.	\$	89.00
6c. Telephone, cell phone, In	ternet, satellite, and cable services	6c.	\$	199.00
6d. Other. Specify: Guard	ian Security	6d.	\$	20.00
Food and housekeeping supp	olies	7.	\$	643.00
Childcare and children's educ	cation costs	8.	\$	0.00
Clothing, laundry, and dry cle	aning	9.	\$	140.00
Personal care products and s	ervices	10.	\$	50.00
Medical and dental expenses		11.	\$	460.00
Transportation. Include gas, m	naintenance, bus or train fare.	40	•	300.00
Do not include car payments.		12.	\$	390.00
	ion, newspapers, magazines, and books	13.	\$	100.00
Charitable contributions and	religious donations	14.	\$	50.00
Insurance.				
	ted from your pay or included in lines 4 or 20.	15a.	¢	400.00
15a. Life insurance			*	168.00
15b. Health insurance		15b.	·	78.00
15c. Vehicle insurance		15c.	\$	140.00
15d. Other insurance. Specify:	distant from the second and the Breeze 4	15d.	Φ	0.00
Specify:	ducted from your pay or included in lines 4 or 20.	16.	\$	0.00
Installment or lease payments 17a. Car payments for Vehicle		17a.	¢	447.02
' '			·	447.83
17b. Car payments for Vehicle	12		·	200.86
17c. Other. Specify:		17c.	\$	0.00
17d. Other. Specify:		17d.	\$	0.00
	aintenance, and support that you did not repone 5, Schedule I, Your Income (Official Form 1		\$	0.00
	support others who do not live with you.	001).	\$	0.00
Specify:	support suite and us not not man your	19.		0.00
	not included in lines 4 or 5 of this form or on		our Income.	
20a. Mortgages on other prope		20a.		0.00
20b. Real estate taxes	•	20b.	\$	0.00
20c. Property, homeowner's, o	or renter's insurance	20c.	\$	0.00
20d. Maintenance, repair, and		20d.	·	0.00
20e. Homeowner's association	· · · ·	20e.	·	0.00
Other: Specify:		21.	*	0.00
			. •	0.00
Calculate your monthly exper	nses			
22a. Add lines 4 through 21.			\$	4,555.25
22b. Copy line 22 (monthly exp	enses for Debtor 2), if any, from Official Form 100	6J-2	\$	
22c. Add line 22a and 22b. The	e result is your monthly expenses.		\$	4,555.25
Calculate your monthly net in	come.			
	ned monthly income) from Schedule I.	23a.	\$	4,827.18
23b. Copy your monthly exper		23b.	·	4,555.25
		200.		7,000.20
23c. Subtract your monthly ex	penses from your monthly income.			
The result is your monthly		23c.	\$	271.93
For example, do you expect to finish modification to the terms of your mo	decrease in your expenses within the year af paying for your car loan within the year or do you expertgage?	ter you file this	s form? payment to increase	or decrease because of
■ No.				
☐ Yes. Explain here:				

Fill in this inform	nation to identify your	case:			
Debtor 1	Lorenzo J. Landr	ıım			
200101	First Name	Middle Name	Last Name		
Debtor 2	Donericia Ivey La				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF OKLAHOMA		
Case number					
(if known)				☐ Check if this is an	
				amended filing	
Official Form	n 106Dec				
Declarat	ion About a	n Individual	Debtor's Schedu	les 12/15	
					_
If two married pe	ople are filing togethe	r, both are equally respo	nsible for supplying correct inforn	nation.	
Va	- fb	la hamlimintari aabadiila		false statement consoling grounds on	
				false statement, concealing property, or to \$250,000, or imprisonment for up to 20	
	B U.S.C. §§ 152, 1341, 1				
Sign	n Below				
					_
Did you pay	y or agree to pay some	one who is NOT an attor	ney to help you fill out bankruptcy	forms?	
■ No					
-				Augusta Danderson (a. Dadiilan Danasan da Mailia	
☐ Yes. N	lame of person			Attach <i>Bankruptcy Petition Preparer's Notice,</i> Declaration, and Signature (Official Form 119)	
				goodianon, and orginature (emotal reministro)	
		di ad I bassa waa didha assaa		de desettes en d	
	e true and correct.	that I have read the sum	mary and schedules filed with this	declaration and	
X /s/ Lore	enzo J. Landrum		X /s/ Donericia Ivey L	andrum	
Lorenz	o J. Landrum		Donericia Ivey Land		
Signatur	e of Debtor 1		Signature of Debtor 2		
Date 🗚	August 18, 2016		Date August 18. 20	016	

Filli	n this inforr	nation to identify you	r case:						
Debt		Lorenzo J. Land							
		First Name	Middle Name	Last Name					
Debt	tor 2 se if, filing)	Donericia Ivey L	andrum Middle Name	Last Name					
		nkruptcy Court for the:	NORTHERN DISTRICT O						
		rinapitoy Court for the.	- HORTHERW BIOTRIOT	J. CILLANIONIA					
Case (if kno	e number _ wn)				_	theck if this is an mended filing			
Sta Be as	s complete a	of Financial	attach a separate sheet to	are filing together, both are	eankruptcy equally responsible for sup y additional pages, write you				
Part	1: Give D	Details About Your Ma	arital Status and Where You	Lived Before					
1. '	What is you	r current marital statu	is?						
	■ Married □ Not mai								
2.	During the l	g the last 3 years, have you lived anywhere other than where you live now?							
	■ No □ Yes. Lis	st all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>i</i> .				
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ldress:	Dates Debtor 2 lived there			
					ity property state or territory ico, Texas, Washington and W				
		•	hedule H: Your Codebtors (O	fficial Form 106H).					
Part	Explai	in the Sources of You	r Income						
	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?			
	□ No ■ Voc Fil	I in the details.							
	– 165. Fil	i iii tile details.							
			Debtor 1		Debtor 2				
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
		of current year untiled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$4,285.00	■ Wages, commissions, bonuses, tips	\$8,199.02			
			☐ Operating a business		☐ Operating a business				

Official Form 107

Debtor 2 Donericia Ivey Landrum Debtor 2			Case number (if known)			
		Debtor 1		Debtor 2		
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
For last caler (January 1 to	ndar year: December 31, 2015)	☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$23,061.00	
		☐ Operating a business		☐ Operating a business		
	dar year before that: December 31, 2014)	☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$49,208.00	
		☐ Operating a business		☐ Operating a business		
Include in and other winnings. List each	come regardless of wh public benefit paymen If you are filing a joint	eme during this year or the two ether that income is taxable. Ex ts; pensions; rental income; inte case and you have income that income from each source separa	camples of other income are a erest; dividends; money collect you received together, list it of	limony; child support; Social stated from lawsuits; royalties; and once under Debtor 1.		
		Debtor 1		Debtor 2		
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)	
	y 1 of current year un filed for bankruptcy:	til SSI Benefits	\$9,120.00			
			\$0.00	Retirement Income	\$15,794.94	
For last caler (January 1 to	ndar year: December 31, 2015)	SSI Benefits	\$14,922.00			
			\$0.00	Pension/Annuity	\$27,077.04	
		Taxable Refunds, Credits, or Offsets	\$1,000.00			
	dar year before that: December 31, 2014)	SSI Benefits	\$14,479.00			
			\$0.00	Pension/Annuity	\$27,077.00	
		Taxable Refunds, Credits, or Offsets	\$840.00			
Part 3: Lis	t Certain Payments Y	ou Made Before You Filed for	Bankruptcy			
	r Debtor 1's or Debto Neither Debtor 1 no	r 2's debts primarily consume or Debtor 2 has primarily cons or a personal, family, or househo	er debts? umer debts. Consumer debt	s are defined in 11 U.S.C. § 10	01(8) as "incurred by an	
		efore you filed for bankruptcy, d	lid you pay any creditor a tota	I of \$6,425* or more?		
	□ No. Go to lin					
	paid that	w each creditor to whom you pa creditor. Do not include payme de payments to an attorney for t	nts for domestic support oblig			

Official Form 107

	btor 1 Lorenzo J. Landrum btor 2 Donericia Ivey Landrum		Cas	se number (if known)		
	* Subject to adjustment on 4/01/	19 and every 3 years after	that for cases filed on	or after the date of	of adjustment.	
	Yes. Debtor 1 or Debtor 2 or both had During the 90 days before you file			al of \$600 or more	?	
	☐ No. Go to line 7.					
	_	itor to whom you paid a tota	al of \$600 or more an	d the total amount	you paid that	creditor. Do not
		domestic support obligation				
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	ayment for
	Chase Home Finance PO Box 24696 Columbus, OH 43224-4696	Monthly	\$2,938.68	\$73,555.70	■ Mortgage □ Car □ Credit Ca □ Loan Re □ Suppliers □ Other	ard
7.	Within 1 year before you filed for bankrup Insiders include your relatives; any general p of which you are an officer, director, person is a business you operate as a sole proprietor. alimony. No Yes. List all payments to an insider.	partners; relatives of any ge n control, or owner of 20%	neral partners; partners or more of their voting	erships of which yog g securities; and a	ou are a genera ny managing a	al partner; corporations agent, including one for
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co		yments or transfer a	any property on a	ccount of a d	ebt that benefited an
	NoYes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment litor's name
Pai	rt 4: Identify Legal Actions, Repossession	ons, and Foreclosures	•			
9.	Within 1 year before you filed for bankrup List all such matters, including personal injury modifications, and contract disputes.					
	■ No□ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details belo		perty repossessed, f	oreclosed, garnis	shed, attached	d, seized, or levied?
	No. Go to line 11.Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happene	ed			

	otor 1 Lorenzo J. Landrum otor 2 Donericia Ivey Landrum		Case number	(if known)				
11.	Within 90 days before you filed for bankru	ıptcy,	did any creditor, including a bank or financial ins	stitution, set off any	amounts from your			
	accounts or refuse to make a payment be	cause	you owed a debt?		•			
	■ No □ Yes. Fill in the details.							
	Creditor Name and Address	De	scribe the action the creditor took	Date action was	Amount			
				taken				
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or		ras any of your property in the possession of an a er official?	assignee for the ben	efit of creditors, a			
	■ No							
	☐ Yes							
Par	t 5: List Certain Gifts and Contributions	3						
13.	Within 2 years before you filed for bankru	ptcy,	did you give any gifts with a total value of more t	han \$600 per person	?			
	No							
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$600)	Describe the gifts	Dates you gave	Value			
	per person		Docoriso tiro girto	the gifts	raido			
	Person to Whom You Gave the Gift and Address:							
14.	Within 2 years before you filed for bankru ☐ No	ptcy, o	did you give any gifts or contributions with a tota	I value of more than	\$600 to any charity?			
	■ Yes. Fill in the details for each gift or contribution.							
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed	Dates you contributed	Value			
	Thessalonian Baptist Church 2523 E. 28th St. No. Tulsa, OK 74110		Money	Monthly	\$50.00			
Par	t 6: List Certain Losses							
15.	Within 1 year before you filed for bankrup or gambling?	tcy or	since you filed for bankruptcy, did you lose any	hing because of the	ft, fire, other disaster,			
	■ No							
	Yes. Fill in the details.							
	Describe the property you lost and how the loss occurred	Descri	ibe any insurance coverage for the loss	Date of your loss	Value of property lost			
			e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	1055	1051			
Par	t 7: List Certain Payments or Transfers							
		4	:d an					
10.	consulted about seeking bankruptcy or p	repari	id you or anyone else acting on your behalf pay on gar bankruptcy petition? 's, or credit counseling agencies for services required.		erty to anyone you			
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment			
	Person Who Made the Payment, if Not Yo	ou		uuc				

Debtor 1 Lorenzo J. Landrum Debtor 2 **Donericia Ivey Landrum** Case number (if known) Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You \$500.00 -Richard A. Chapman, PC \$700.00 **Attorney Fees** 1612 S. Cincinnati Ave., Ste. 210 08/11/2016: Tulsa, OK 74119 \$200 rchapman@tulsacoxmail.com 08/18/2016 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of **Address** transferred or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No ☐ Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Type of account or Name of Financial Institution and Last 4 digits of Date account was Last balance Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or Code) moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still

Address (Number, Street, City,

State and ZIP Code)

Address (Number, Street, City, State and ZIP Code)

have it?

	tor 2 Donericia Ivey Landrum		Case number (if known)					
22.	Have you stored property in a storage unit or pl	ace other than your home within 1	year before you filed for bankruptcy?	,				
	■ No	·						
	Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?				
Par	9: Identify Property You Hold or Control for	Someone Else						
23.	Do you hold or control any property that someo for someone.	one else owns? Include any proper	ty you borrowed from, are storing for	, or hold in trust				
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value				
Par	10: Give Details About Environmental Information	ation						
For	he purpose of Part 10, the following definitions	apply:						
	Environmental law means any federal, state, or toxic substances, wastes, or material into the airegulations controlling the cleanup of these sub	ir, land, soil, surface water, ground	<u> </u>					
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		law, whether you now own, operate, o	or utilize it or used				
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s		s waste, hazardous substance, toxic s	ubstance,				
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of wher	n they occurred.					
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environme	ental law?				
	■ No							
	Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any	release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or adminis	,	ironmental law? Include settlements a	and orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	11: Give Details About Your Business or Con	nections to Any Business						
27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have an	ny of the following connections to any	business?				
	☐ A sole proprietor or self-employed in a t	trade, profession, or other activity,	either full-time or part-time					
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	ip (LLP)					
Offici	al Form 107 Statement of	of Financial Affairs for Individuals Filing	g for Bankruptcy	page				

Best Case Bankruptcy

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Debtor 1 Lorenzo J. Landrum Debtor 2 Donericia Ivey Landrum			Case number (if known)		
	☐ A partner in a partnership				
	☐ An officer, director, or managing e	executive of a corporation			
	☐ An owner of at least 5% of the voti	ing or equity securities of a corporation			
	■ No. None of the above applies. Go to	Part 12.			
	☐ Yes. Check all that apply above and f	ill in the details below for each business.			
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed		
28. Within 2 years before you filed for bankruptcy, did you give a financial statement to institutions, creditors, or other parties.		o anyone about your business? Include all financial			
	■ No □ Yes. Fill in the details below.				
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued			

Debtor	1 Lorenzo J. Landrum			
Debtor	2 Donericia Ivey Landrum		Case num	nber (if known)
Part 12	Sign Below			
are true with a b	ead the answers on this <i>Statement of Fina</i> and correct. I understand that making a fankruptcy case can result in fines up to \$C. §§ 152, 1341, 1519, and 3571.	alse statement	concealing property, or obtaining	ng money or property by fraud in connect
/s/ Lor	enzo J. Landrum	/s/ Do	nericia Ivey Landrum	
Loren	zo J. Landrum	Donericia Ivey Landrum		
Signati	ure of Debtor 1	Signat	ure of Debtor 2	
Date	August 18, 2016	Date	August 18, 2016	
Did you	attach additional pages to Your Statemen	nt of Financial	Affairs for Individuals Filing for B	ankruptcy (Official Form 107)?
No				
☐ Yes				
Did you ■ No	pay or agree to pay someone who is not	an attorney to l	nelp you fill out bankruptcy forms	s?
☐ Yes.	Name of Person . Attach the Bankrup	tcv Petition Prei	parer's Notice, Declaration, and Sig	nature (Official Form 119).

Fill in this inforr	mation to identify your case:		
Debtor 1	Lorenzo J. Landrum First Name Middle Name	Last Name	
Debtor 2	Donericia Ivey Landrum	Last Name	
(Spouse if, filing)	First Name Middle Name	Last Name	
United States Ba	nkruptcy Court for the: NORTHERN DIS	TRICT OF OKLAHOMA	
Case number _ (if known)			☐ Check if this is an amended filing
Official Fo Statemer		viduals Filing Under Chapte	r 7 12/15
	ividual filing under chapter 7, you must fil	ll out this form if:	
■ you have leas You must file this	ever is earlier, unless the court extends th	not expired. you file your bankruptcy petition or by the date set e time for cause. You must also send copies to the	
	eople are filing together in a joint case, bo nd date the form.	oth are equally responsible for supplying correct inf	ormation. Both debtors must
	and accurate as possible. If more space is our name and case number (if known).	s needed, attach a separate sheet to this form. On t	he top of any additional pages,
Part 1: List Yo	our Creditors Who Have Secured Claims		
1. For any credite	•	Creditors Who Have Claims Secured by Property	(Official Form 106D), fill in the
	editor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's B	Bank of America	☐ Surrender the property.	□ No
name:		Retain the property and redeem it.	■ Yes
Description of property securing debt:	Sedan 4D 4.3L V8	 ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	■ Yes
_	chase Home Finance	☐ Surrender the property.	□ No
name:		Retain the property and redeem it.	■ Yes
Description of property securing debt: 437 E. Tecumseh St. Tulsa, OK 74106-4624 Tulsa County Legal Description: MEADOWBROOK ADDN S.95' LOT-10 BLK-6, TULSA COUNTY, STATE OF OKLAHOMA		 ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	— 165
Creditor's O	neMain Financial	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
		Retain the property and enter into a	■ Yes

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Debtor 1 Lorenzo J. Landrum Debtor 2 Donericia Ivey Landrum	Case number (if known)						
Description of property securing debt: 2005 Chevy Silverado 1500 200,000 miles Reg. Cab 4.3L V6	Reaffirmation Agreement. Retain the property and [explain]:	_					
Part 2: List Your Unexpired Personal Property Leases for any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).							
Describe your unexpired personal property leases		Will the lease be assumed?					
Lessor's name:		□ No					
Description of leased Property:		☐ Yes					
Lessor's name: Description of leased Property:		□ No					
Topoly.		☐ Yes					
Lessor's name: Description of leased		□ No					
Property:		☐ Yes					
Lessor's name:		□ No					
Description of leased Property:		☐ Yes					
Lessor's name:		□ No					
Description of leased Property:		☐ Yes					
Lessor's name:		□ No					
Description of leased Property:		☐ Yes					
Lessor's name:		□ No					
Description of leased Property:		☐ Yes					

Debtor 1 Debtor 2	Lorenzo J. Landrum Donericia Ivey Landrum	Case number (if known)
Part 3:	Sign Below	
•	nalty of perjury, I declare that I have indicated that is subject to an unexpired lease.	my intention about any property of my estate that secures a debt and any personal
χ /s/	∟orenzo J. Landrum	χ /s/ Donericia Ivey Landrum
Loi	enzo J. Landrum	Donericia Ivey Landrum
Sigi	ature of Debtor 1	Signature of Debtor 2
Dat	e August 18, 2016	Date August 18, 2016

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Oklahoma

In	Lorenzo J. Landrum re Donericia Ivey Landrum		Case No.		
	Boneriola IVOy Earlardin	Debtor(s)	Chapter	7	
1.	DISCLOSURE OF COMPEN Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(not.
1.	compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation o	g of the petition in bankruptcy,	or agreed to be paid	to me, for services	rendered or to
				1,115.00	
	Prior to the filing of this statement I have received		\$	700.00	
	Balance Due		\$	415.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compe	ensation with any other person	unless they are mem	bers and associates	of my law firm.
	☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name				law firm. A
5.	In return for the above-disclosed fee, I have agreed to re-	nder legal service for all aspect	s of the bankruptcy	case, including:	
	a. Analysis of the debtor's financial situation, and renderb. Preparation and filing of any petition, schedules, statec. Representation of the debtor at the meeting of creditord. [Other provisions as needed]	ement of affairs and plan which irs and confirmation hearing, ar	may be required; ad any adjourned hea	rings thereof;	
	Negotiations with secured creditors to re reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hou	ns as needed; preparation			
5.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding.			es, relief from st	ay actions or
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any s bankruptcy proceeding.	agreement or arrangement for	payment to me for r	epresentation of the	: debtor(s) in
	August 18, 2016	/s/ Richard A. Cha	apman		
	Date	Richard A. Chapr			
		Signature of Attorne Richard A. Chapr			
		1612 S. Cincinnat			
		Tulsa, OK 74119		_	
		(918) 392-5170 F rchapman@tulsa		5	
		Name of law firm	COAIIIAII.CUIII		
		J J			

Revised 02/2012

United States Bankruptcy Court Northern District of Oklahoma

Lorenzo J. Landrum In re Donericia Ivey Landrum					Case No.		
		Γ	Debtor(s)		Chapter	7	
VERIFICA	ATION A	S TO O	FFICIA	L CREDITO	OR LIST		
	•		Original				
			Amendr	nent			
		Add		Delete			
I hereby certify under penalty of p List Submission application, or uploaded to best of my knowledge.							
I further acknowledge that (1) the responsibility of the debtor and the debtor' that the various schedules and statements r	s attorney	(2) the	court wil	ll rely on the	creditor list	ting f	for all mailings, and (3)
If this filing is an amendment to deleted at this time. (For verification pudeleted.)							
# of Creditors (or if amend Method of submission: a)X uploaded to Electronic b)Creditor List Submission www.oknb.uscourts # of Creditors (on attached list	c Case Filon applica	ing Syste ation (to b vailable i	em; or be used b		rs, found or	ı the	Court's website at
/s/ Lorenzo J. Landrum		/s/ Do	nericia Iv	vey Landrum			
Debtor Signature		Joint	Debtor S	Signature			
Address:(if not represented by an attorney)	Addr	ess:(if no	ot represente	d by an atto	rney)
Phone:(if not represented by an attorney)		Phone	e:(if not	represented l	oy an attorn	ey)	
/s/ Richard A. Chapman		Date:	August	18, 2016			
Attorney Signature				<u> </u>			
Richard A. Chapman			ck if app			_	
Richard A. Chapman, PC 1612 S. Cincinnati Ave., Ste. 210		C	creditors	with foreign	addresses i	nclu	ded
Tulsa, OK 74119-0000							
(918) 392-5170							
(918) 392-5646							
rchapman@tulsacoxmail.com							

American Express PO Box 650448 Dallas, TX 75265-0448

Bank of America PO Box 982235 El Paso, TX 79998-2235

Bank of America 475 CrossPoint Pkwy PO Box 9000 Getzville, NY 14068

Capital One Bankruptcy Claims Servicer PO Box 30285 Salt Lake City, UT 84130-0285

Capital One Retail Services PO Box 30257 Salt Lake City, UT 84130-0257

Cash Finance of Tulsa 801-A S. Detroit Ave. Tulsa, OK 74120

Chase Home Finance PO Box 24696 Columbus, OH 43224-4696

Citi Customer Service PO Box 6500 Sioux Falls, SD 57117-6500

Comenity Bank Bankruptcy Dept. PO Box 182125 Columbus, OH 43218-2125

Credit One Bank Bank Card Center PO Box 98873 Las Vegas, NV 89193-8873

Discover PO Box 3025 New Albany, OH 43054-3025

Financial Corporation of America PO Box 203500 Austin, TX 78720-3500

Firefighters' Credit Union 9200 East 41st St. Tulsa, OK 74145

Hillcrest HealthCare System PO Box 9800 Coral Springs, FL 33075-9800

Merrick Bank PO Box 9201 Old Bethpage, NY 11804-9002

OneMain Financial 3602-10 E. 51st St. Tulsa, OK 74135

Pioneer Services PO Box 801634 Kansas City, MO 64180-1634

Regional Medical Laboratory 9330 East 41st St., Suite 105 Tulsa, OK 74145

Sears Credit Cards PO Box 6282 Sioux Falls, SD 57117-6282

St. John Health System 1923 South Utica Avenue Attn: Business Office Tulsa, OK 74104-6502

Synchrony Bank Attn: Bankruptcy Dept. PO Box 965060 Orlando, FL 32896-5060

TAB Services 1754 Utica Square PO Box 52039 Tulsa, OK 74152-0039

Tulsa Emergency Medical Center, Inc. 2550 N. Thunderbird Cr., Ste. 123 Mesa, AZ 85215-1217

FORM 1007-1F (10/07)

Lorenzo J. Landrum

United States Bankruptcy Court Northern District of Oklahoma

In re	Donericia Ivey Landrum		Case No.	
	-	Debtor(s)	Chapter	7
	PAYMENT A (NOTE: A separate form m	DVICES CERTIFIC A ust be filed by each del		e)
	Pursuant to 11 U.S.C. § 521(a)(1)(B)(iv), a dent (such as paycheck stubs, direct deposit states otor's employer <i>within 60 days</i> before the date to	ments, employer's state	ment of hours and	l earnings) received from
I, <u>Do</u>	nericia Ivey Landrum hereby state as follows:	:		
(select √	one) I have attached hereto, or previously filed wit payment received from my employer(s) withi			es or other evidence of
	Number of Employers:1 Number of Payment Advices attach Period Covered:06/06/2016 - 08/	ed: 5	yment Advices re	eceived: 5
	(If period covered If the attached payment advices do not cover that you intend to rely upon	ed is less than 60 days, the entire 60-day period		
	I received payment advices from an employer located or obtained copies of all of the payment other evidence of payment within 45 days from the evidence of payment within 45 days.	ent advices. I understand	d that if I do not f	ile all payment advices or
	Number of Employers: Period Covered: Number of missing Payment Advic	Number of Paymes: Dates of		
	I did not receive any payment advices or othe days before the petition date. (If you were empayment advices from your employer.)			
inform	I declare under penalty of perjury that the foration and belief.	egoing statement is true	and correct to th	e best of my knowledge,
Date:	August 18, 2016	s/Donericia Ive (Signature of D	•	
		Print name:	Donericia Ivey La	ndrum

^{*} In order to protect the debtor's privacy, all but the last four digits of the Debtor's social security number and financial account number should be redacted from any payment advice. References to dates of birth should contain only the year and names of any minors should be redacted or include only initials.

Tulsa Public	c School	s, Tulsa, C	OK 74147 - (0208			Advice Amo	unt	\$16.58
Emp No.		Employee Na	ame		Advice Date	Period En		Туре	Advice No.
		ERICIA IVEY			06/24/2016	06/19/20		BIWEEKLY	492931
Earnings	Rate	Days/Hrs.	Current			Current	YTD	Emplr	Empr YTD
REG ERN BW NONSCHD HR	.01	1.00	.01	5,802.33 FI	CA EDICARE	1.18 .28	426.57 99.77	1 18 .28	426.57 99.77
SICK LV BW					ED-NC W/FBA	.20	33.77	249.88	2,998.56
OMP USED					UMMER INS	-7.50	-26.31		
OVER PAY TIPEND				45.00 D 96.24 F		2.03	24.36 195.77	5.50	66.0
ETRO-NC					TATE TAX		20.00		
BA NC EX			13.56	162.72 L					15.3
					ISB DIST NITED WAY	1.00	11.00		18.9
					MITED WAT	1.00	11.00		
					EPOSITS:	10.50	0.000.05		
				D	D NET TULSA MUNICIPAL EMP	16.58 L. FED. C.U	6,068.05		
				l					
				ĺ					
Leave	Beginning	Earned	Used	Balance	YTD Earned YTD U		VACAL-L-	latin n. Allannan	
SICK		Earneu						Iding Allowances us Exemptions	
PERSONAL	66.75 5.63			66.75 5.63	18.00 36	Federal	M	us CAGINDUONS	\$.0
COMP TIME	0.01			.01	4.59	1.58 State	M	1	\$.0
						0.0.0		dvice Total	Ψ .(
						Туре		Current	YTE
						Taxable Pa	ıy	19.04	6,880.3
						Gross Pay		13.57	6,878.4
						Deductions	5	-3.01	751.1



Forwarding Service Requested

492931 0345 DONERICIA IVEY LANDRUM 437 E TECUMSEH ST TULSA, OK 74106 DIRECT DEPOSIT NON-NEGOTIABLE

16.58

6,068.05

Net Pay

Tulsa Public	c Schoo	ls, Tulsa, C	OK 74147 -	0208			Advice Am	ount	\$324.87
Emp No.		Employee Na			Advice Date		d Ending	Туре	Advice No.
		ERICIA IVEY		1/25	07/08/2016		03/2016	BIWEEKLY	495007
amings	Rate	Days/Hrs.	Current		Deductions	Current	YTD	Emplr	Empr YTD
REG ERN BW	11.14	29.87	332.75	6,135.08		21.81	448.38	21.81	448.38
ONSCHD HR ICK LV BW					MEDICARE MED-NC W/FBA	5.10	104.87	5.10 249.88	104.8° 3,248.4
OMP USED					SUMMER INS	-7.50	-33.81	243.00	3,240.4
OVER PAY					DENTAL.	2.03	26.39	5.50	71.5
TIPEND					FED TAX		195.77		
ETRO-NC			13.56		STATE TAX LF BASIC		20.00	2.50	17.9
BA NC EX			13.50	170.20	DISB DIST			2.56 2.78	21.7
					UNITED WAY		11.00	2.70	2
					PERCOITO				
					DEPOSITS:	324.87	6,392.92		
					TULSA MUNICIPAL I		0,352.52		
	RA MINIST	-	1000	Delegan	VTD F	NOT THE OWNER.	VANNAGA	epan - an	
Leave	Beginning		Used	Balance	Name and Advanced to the Advan	Used		olding Allowance tus - Exemption	
SICK PERSONAL	66.75 5.63			66.75 5.63		36.00 Fede		tus - Exemption	S Extra Amou \$.(
OMP TIME	0.01			.01		4.58 State		1	\$.0
						Otate		Advice Total	
						Type		Curren	YTE
							ble Pay	351.7	
						Gross	•	346.3	
							ctions	21.4	
						Net F			
						Net F	ray	324.8	7 6,392.9



Tulsa Public Schools
Independent School District No. 1
P.O. Box 470208
Tulsa, OK 74147-0208

Forwarding Service Requested

495007 0345 DONERICIA IVEY LANDRUM 437 E TECUMSEH ST TULSA, OK 74106

DIRECT DEPOSIT NON-NEGOTIABLE

		<u> </u>	K 74147 -	0208			Advice Amour	nt	\$556.88
Emp.No. _r		Employee Na			Advice Date	Period E		Туре	Advice No.
Earnings	Rate	Days/Hrs.	Current	VTD	07/22/2016 Deductions	07/17/20 Current	VTD B	IWEEKLY Emplr	498001 Empr YTD
REG ERN BW	11.14	53.82	599.55	6,734.63		38.35	486.73	38.35	486.73
NONSCHD HR	11.14	55.62	399.55		MEDICARE	8.97	113.84	8.97	113.84
SICK LV BW					MED-NC W/FBA	0,01	. ,	249.88	3,498.32
OMP USED					SUMMER INS	-7.50	-41.31		
COVER PAY STIPEND					DENTAL FED TAX	2.03 13.38	28.42 209.15	5.50	77.00
RETRO-NC					STATE TAX	1.00	21.00		
BA NC EX			13.56		LF BASIC				17.92
					DISB DIST				21.70
					UNITED WAY		11.00		
					DEPOSITS:				
					DD NET	556.88	6,949.80		
					TULSA MUNICIPAL E	MPL. FED. C.U			
					}				
					}				
Leave F	Beginning	Earned	Used	Balance	YTD Famed YTD	Used	Withhold	ing Allowances	
	Beginning	Earned	Used	Balance		Used		ing Allowances	
SICK	85.73	Earned	Used	85.72	2	Name of the last	Filing Status	Exemptions	Extra Amoun
SICK PERSONAL	85.73 -13.35	Earned	Used	85.72 -13.35		Federal	Filing Status M	Exemptions 1	Extra Amoun \$.00
SICK PERSONAL	85.73	Earned	Used	85.72		Name of the last	Filing Status M M	Exemptions 1 1	Extra Amoun
SICK PERSONAL	85.73 -13.35	Earned	Used	85.72 -13.35		Federal State	Filing Status M M	1 1 vice Total	Extra Amoun \$.00 \$.00
SICK PERSONAL	85.73 -13.35	Earned	Used	85.72 -13.35		Federal State	Filing Status M M Ad	Exemptions 1 1 vice Total Current	\$.00 \$.00 YTD
SICK PERSONAL	85.73 -13.35	Eamed	Used	85.72 -13.35		Federal State Type Taxable P	Filing Status M M Ad	1 1 vice Total	Extra Amoun \$.00 \$.00
SICK PERSONAL	85.73 -13.35	Eamed	Used	85.72 -13.35		Federal State	Filing Status M M Ad	Exemptions 1 1 vice Total Current	\$.00 \$.00 YTD
Leave E SICK PERSONAL COMP TIME	85.73 -13.35	Eamed	Used	85.72 -13.35		Federal State Type Taxable P	Filing Status M M Ad	s Exemptions 1 1 vice Total Current 618.58	\$.00 \$.00 YTD 7,850.71



Tulsa Public Schools Independent School District No. 1 P.O. Box 470208 Tulsa, OK 74147-0208

Forwarding Service Requested

498001 0345 DONERICIA IVEY LANDRUM 437 E TECUMSEH ST TULSA, OK 74106

DIRECT DEPOSIT NON-NEGOTIABLE

Tulsa Publi	c School	s, Tulsa, O	K 74147 - (208			Advice Amount		
Emp No		Employee Na			Advice Date	Period E		Туре	Advice No.
		ERICIA IVEY L		-	08/05/2016	07/31/2		BIWEEKLY	500023
amings	Rate	Days/Hrs.	Current		Deductions	Current	YTD	Empir	Empr YTD
REG ERN BW NONSCHD HR	11.14	27.85	310.25	7,044.88	FICA MEDICARE	20.42	507.15	20.42	507.15
SICK LV BW					MED-NC W/FBA	4.77	118.61	4.77 249.88	118.61 3,748.20
OMP USED					SUMMER INS	-7.50	-48.81	243.00	5,740.20
OVER PAY					DENTAL	2.03	30.45	5.50	82.50
TIPEND					FED TAX		209.15		
ETRO-NC BA NC EX			13.56		STATE TAX LF BASIC		21.00	2.56	20.4
BA NC EX			13.30	203.40	DISB DIST			2.78	24.48
					UNITED WAY		11.00		
					DEPOSITS:				
					DD NET	304.09	7,253.89		
					TULSA MUNICIPAL E		,		
					1				
					[
					ļ				
Leave	Beginning	Earned	Used	Balance		Used	Withho	lding Allowance	
SICK PERSONAL	85.73 -13.35			85.72 -13.35		Federal		us Exemptions	
	0.01			-13.30 01.		State	M	1	\$.0 \$.0
COMP TIME	0.01			.01		State	M	Advice Total	\$.0
							/	wice rotal	
						Type		Current	VTD
						Type Tayable D	E	Current	
						Taxable P	,	329.28	8,179.99
						Taxable P Gross Pay	, ´	329.28 323.81	8,179.99 8,161.63
						Taxable P	, ´	329.28	8,179.99 8,161.63 848.55



Tulsa Public Schools Independent School District No. 1 P.O. Box 470208 Tulsa, OK 74147-0208

Forwarding Service Requested

500023 0345 DONERICIA IVEY LANDRUM 437 E TECUMSEH ST TULSA, OK 74106 DIRECT DEPOSIT NON-NEGOTIABLE

Tulsa Public	c Schoo			0208			Advice Amo	ount	\$17.57
Emp No		Employee Na	ame		Advice Date	Period E		Туре	Advice No.
		IERICIA IVEY		A Contract Contract	08/19/2016	08/14/2		BIWEEKLY	502027
arnings	Rate	Days/Hrs.	Current		Deductions	Current	YTD	Emplr	Empr YTD
REG ERN BW IONSCHD HR	.01	1.00	.01	7,044.89	FICA MEDICARE	1.18 .28	508.33	1.18	508.33 118.89
ICK LV BW					MED-NC W/FBA	.20	118.89	.28 249.88	3,998.08
OMP USED				55.10	SUMMER INS	-7.49	-56.30		
OVER PAY TIPÉND					DENTAL FED TAX	2.03	32.48	5.50	88.0
ETRO-NC					STATE TAX		209.15 21.00		
BA NC EX			13.56		LF BASIC		200		20.4
					DISB DIST UNITED WAY		11.00		24.4
					UNITED WAT		11.00		
					DEPOSITS:				
					DD NET TULSA MUNICIPAL E	17.57 MPL FED C U	7,271.46		
							mer :		
- extins	-45000000000000000000000000000000000000		AUROSES	200 H-100 H-100	A PROPERTY OF THE PERSON OF TH	0.8.8	200000	News 19th	
	Beginning	Earned	Used	Balance		Used		olding Allowance	
ICK	85.73			85.72			•	us Exemptions	
PERSONAL	-13.35	18.00		4.65		Federal	М	1	\$.0
OMP TIME	0.01			.01		State	M	1	\$.0
							<i>F</i>	Advice Total	
						Type		Current	YTD
						Taxable P		19.03	
						Gross Pay	•	13.57	8,175.20
						Deduction	S	-4.00	844.55
						Net Pay		17.57	7,271.46



Tulsa Public Schools
Independent School District No. 1
P.O. Box 470208
Tulsa, OK 74147-0208

Forwarding Service Requested

502027 0345 DONERICIA IVEY LANDRUM 437 E TECUMSEH ST TULSA, OK 74106 DIRECT DEPOSIT NON-NEGOTIABLE



RE TR 981 LANDRUM, DONERICIA 437 E TECUMSEH STREET TULSA OK 741060000

Statement of Earnings and Deductions								
Name	Employee ID	Overtime and Leave Period Beginning	Overtime and Leave Period Ending	Pay Date)			
LANDRUM, DONERICIA	T - 1	06-01-2016	06-30-2016	06-30-201	6			
Available Vac Hours	Available Sick Hours			Deposit/Check Number	Net Pay			
0.00	0.00			901980227	1,938.78			

Earnings						
Description	Rate	Hours	Current	Year To Date		
REGULAR EARNING	13.0173	173.34	2,256.42	13,538.52		
NON TAX ADJ			3.73	22.38		

Taxes						
Description	Current	Year To Date				
FEDERAL TAX	220.64	1,323.84				
OKLAHOMA	97.00	582.00				

Deductions					
Description	Current	Year To Date			

Summary							
	Earnings	Taxes	Deductions	Net Pay	Check Amount		
Current	2,256.42	317.64	0.00	1,938.78	1,938.78		
YTD	13,538.52	1,905.84	0.00	11,632.68			

Direct Deposit				Tax Withh	olding Information	
Bank Name	Account #	Amount	Туре	Marital Status	Exemptions	Additional Amt
EMPLOYEES FEDERAL CREDIT UNION	****	1,938.78	Federal State	M M	001 001	100.00 70.00

View your pay stub on-line anytime at www.cityoftulsa.org/employees You will need to provide your login ID and your password.



RE TR 981 LANDRUM, DONERICIA 437 E TECUMSEH STREET TULSA OK 741060000

Statement of Earnings and Deductions								
Name	Employee ID	Overtime and Leave Period Beginning	Overtime and Leave Period Ending	Pay Date	е			
LANDRUM, DONERICIA		07-01-2016	07-31-2016	07-29-201	6			
Available Vac Hours	Available Sick Hours			Deposit/Check Number	Net Pay			
0.00	0.00			901992178	1,938.78			

Earnings						
Description	Rate	Hours	Current	Year To Date		
REGULAR EARNING	13.0173	173.34	2,256.42	15,794.94		
NON TAX ADJ			3.73	26.11		

	Taxes	
Description	Current	Year To Date
FEDERAL TAX	220.64	1,544.48
OKLAHOMA	97.00	679.00

_						
Deductions						
ſ	Description	Current	Year To Date			

Summary								
	Earnings	Taxes	Deductions	Net Pay	Check Amount			
Current	2,256.42	317.64	0.00	1,938.78	1,938.78			
YTD	15,794.94	2,223.48	0.00	13,571.46				

Direct Deposit				Tax Withh	olding Information	
Bank Name	Account	# Amount	Type	Marital Status	Exemptions	Additional Amt
EMPLOYEES FEDERAL CREDIT	* * * * * `	1 020 70	Federal	M	001	100.00
UNION		1,938.78	State	M	001	70.00

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You will need to provide your login ID and your password.